

## STATE OF NEW HAMPSHIRE 2018 Statement of Income and Expenses

for LOBBYISTS (RSA Chapter 15) RECEIVED

APR 27 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

I. Name of Lobbyist(s) <u>Rob</u>	ert L. Nash		
II. Name of lobbyist's partne	ership, firm or corporation, if	any:	
n/a			
(Name of par	tnership, firm or corporation)		
13 Lakeview Court	Hillsboro	NH	03244
Business Address: (Street)	(Town/City)	(State)	(Zip Code)
(603) <u>540-7283</u> (Telephone)	( ) <u>n/a</u> (F	e-mail <u>bobnash</u>	n66@gmail.com
III. This statement covers: (6 reportable expense transacti	Choose one – file separate rep ons which are not attributabl	orts for each client, OR you ne to any one client).	nay file a separate report for
☑ All reportable transactions	occurring in the months prior	to the reporting date relative to t	the following client:
(Full N	iation of Domestic Insurar lame of Client as it appears on the	nce Companies Lobbyist Registration Form)	
OR  ☐ All reportable transactions unrelated to any particular clie	• • •	obbyist's family), or the lobbying	ng firm listed below which are
	25, 2018 🗵 date of registration to 3/31/18	July 25, 2018	78
Octo	ber 31, 2018	January 30, 2019 activity from 10/1/18 to 12/3	
V. There have been no fee If this box is checked, complet Concord, NH 03301.	es received and no reportal te just this form and submit it to	ole transactions made since the Secretary of State's Office,	the last report. □ State House, Room 204,
VI. Check if additional repo	rts are attached:		
		st file Addendum A- Fees and	Expenses
☐ If you have paid an honor Expense Reimbursement	rarium or reimbursed expenses,	you must file Addendum B-R	Report of Honorariums or
☐ If you, your firm, or your	family has made political cont	ributions, you must file Addend	lum C– Political Contributions
Sworn Statement/Affirmation I have read RSA 15, RSA 15- and complete to the best of m	B, RSA 14-C and RSA 664 and	d hereby swear or affirm that the	e foregoing information is true
(Signature of lobbyist)		04/25/18	
(Signature of lobbyist)		(D	Pate)
Robert L. Nash (Print Name of lobbyist)			

#### P L E A S E P R I N T

### STATE OF NEW HAMPSHIRE

# Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbyist(s) Robert L. Nash					
II. Name of lobbyist's partnership, firm or corporation, if any:					
n/a					
(Name of partnership, firm or corporation)					
III. Name of Client NH Association of Domestic Insurance Compani	ies Date 04	1/25/18			
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses:	relations, or	public relations services			
a) Total of all fees received in this reporting period	a) \$	11,250.00			
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$ ear)	0.00			
c) Total of all fees received to date (Add lines a and b)	c) \$	11,250.00			
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$	0.00			
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to report all expenses made from lobbying fees. Separate reports are to be filed for expenditures made relative to each client and if expenditures are made by the lobbyist(s)/firm that are unrelated to any one client a separate report may be filed for the lobbyist(s)/firm. Expenses are to be reported in one of three categories of expenses: (a) the aggregate total of all expenses paid during the reporting period for salaries, benefits, support staff, and office expenses; (b) the aggregate total of all individual expenses where the expenditure was of \$25.00 or less (for example: meals purchased during a business lunch where the cost was \$25.00 or less, purchase of a pen with a value of less than \$10 that is given to the person being lobbied, purchase of a ceremonial object given to a person being lobbied with a value of \$25.00 or less); and (c) an itemized statement of each individual expenditure made during this reporting period of greater than \$25.00 for any purpose not covered by (a) (for example: purchase of a meal with value of greater than \$25, purchase of a ceremonial object to be given to the subject of lobbying with a value greater than \$25, but not greater than \$50, restaurant expenses for a legislative reception). Expenses for honorariums, expense reimbursement, or political contributions will be reported on separate addendums and should not be reported on Addendum A.					
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.		0.00			
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$	0.00			
c) Total of all itemized expenditures reported in detail in section VI.	c) \$	0.00			

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$	0.00_
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$	0.00
f) Total of all expenses year to date	f) \$	0.00
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees du	ring this reporting
Paid to:	Amount:	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
Sworn Statement/Affirmation by Lobbyist		
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affire is true and complete to the best of my knowledge and belief.	m that the fore	going information
Lowth nu	04/25/	/18
(Signature of lobbyist)	(Dat	te)
Robert L. Nash (Print Name of lobbyist)		

### State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

(Print Name of lobbyist)

Sworn Statement/Affirmation by Lob Statement of Income and Expenses fo	•
Name of Lobbying partnership, firm, or cor	poration:n/a
Name of Client (leave blank if Statement is	for the partnership, firm, or corporation and not related to any
particular client): New Hampshire Ass	sociation of Domestic Insurance Companies
Date of Report (check one):	
April 25, 2018 ☑ July 25, 2018 □	October 31, 2018   January 30, 2019
I have read RSA 15, RSA 15-B, RSA 664 the following Addendums submitted with submitted):  Addendum A(s).	, the Statement of Income and Expenses described above, and that Statement (insert the number of Addendum forms being
Addendum B(s).	
Addendum C(s).	
complete to the best of my knowledge and	; information on the Statement and each Addendum is true and belief.
C A.Lta ne	04/25/18
(Signature of lobbyist)	(Date)
Robert L. Nash	